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Date: September 18, 2000

No. of Pages (including cover): 6

To: Ms. Paulette Kidwell
PCT
United States Patent & Trademark
Office

Fax Number: 703-305-3230
Contact Number: 703-305-3656

From: Frances B. Cutajar, Sr. Legal Assistant

Reference No.: 1103326-0633

Re: U.S. Application Serial No. 09/622,745 (National Phase of PCT/Se00/00878)

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Dear Ms. Kidwell:

Further to your telephone request this afternoon, attached is a copy of the PCT/RO/101 Request form. Also attached is a copy of the USPTO return postcard indicating that a copy was forwarded with the national application filing papers.

Thank you.

Sincerely,

Frances B. Cutajar
Frances B. Cutajar
Senior Legal Assistant

Attachments

cc: John M. Genova, Esq.

PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

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International Application No.

International Filing Date

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference
(if desired) (12 characters maximum) H 2174-1 WO

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Box No. II APPLICANT	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) AstraZeneca AB S-151 85 Södertälje Sweden	<input type="checkbox"/> This person is also inventor. Telephone No. +46 8 553 260 00 Facsimile No. +46 8 553 288 20 Teleprinter No.
State (that is, country) of nationality: SE	State (that is, country) of residence: SE
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
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<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.	
Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE	
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Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) Global Intellectual Property, Patents AstraZeneca AB S-151 85 Södertälje Sweden	Telephone No. +46 8 553 260 00 Facsimile No. +46 8 553 288 20 Teleprinter No.
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State (that is, country) of nationality: SE	State (that is, country) of residence: SE
<p>This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box</p>	
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Box No.V DESIGNATION OF STATES

The following designations are hereby made under Rule 4.9(a) (mark the applicable check-boxes: at least one must be marked):


Regional Patent

- ☒ **AP** ARIPO Patent: CH Ghana, GM Gambia, KE Kenya, LS Lesotho, MW Malawi, SD Sudan, SL Sierra Leone, SZ Swaziland, TZ United Republic of Tanzania, UG Uganda, ZW Zimbabwe, and any other State which is a Contracting State of the Harare Protocol and of the PCT
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- ☒ **OA** OAPI Patent: BF Burkina Faso, BJ Benin, CF Central African Republic, CG Congo, CI Côte d'Ivoire, CM Cameroon, GA Gabon, GN Guinea, GW Guinea-Bissau, ML Mali, MR Mauritania, NE Niger, SN Senegal, TD Chad, TG Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT (if other kind of protection or treatment desired, specify on dotted line)

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| <input checked="" type="checkbox"/> BB Barbados | <input checked="" type="checkbox"/> MG Madagascar |
| <input checked="" type="checkbox"/> BG Bulgaria | <input checked="" type="checkbox"/> MK The former Yugoslav Republic of Macedonia |
| <input checked="" type="checkbox"/> BR Brazil | |
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Box No. VI PRIORITY CLAIM		<input type="checkbox"/> Further priority claims are indicated in the Supplemental Box.		
Filing date of earlier application (day/month/year)	Number of earlier application	Where earlier application is:		
		national application: country	regional application: regional Office	international application: receiving Office
item (1) 06 May 1999 (06.05.1999)	9901659-4	Sweden (SE)		
item (2)				
item (3)				
<input checked="" type="checkbox"/> The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of the present international application is the receiving Office) identified above as item(s): (1)				
<i>* Where the earlier application is an ARIPO application, it is mandatory to indicate in the Supplemental Box at least one country party to the Paris Convention for the Protection of Industrial Property for which that earlier application was filed (Rule 4.10(b)(ii)). See Supplemental Box.</i>				
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Choice of International Searching Authority (ISA) (if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):		Request to use results of earlier search; reference to that search (if an earlier search has been carried out by or requested from the International Searching Authority):		
ISA/ SE		Date (day/month/year) 27 December 1999	Number SE99/00556	Country (or regional Office) Sweden (SE)
Box No. VIII CHECK LIST: LANGUAGE OF FILING				
This international application contains the following number of sheets:		This international application is accompanied by the item(s) marked below:		
request : 4		1. <input checked="" type="checkbox"/> fee calculation sheet		
description (excluding sequence listing part) : 26		2. <input type="checkbox"/> separate signed power of attorney		
claims : 5		3. <input checked="" type="checkbox"/> copy of general power of attorney, reference number, if any: GF1189/2000		
abstract : 1		4. <input type="checkbox"/> statement explaining lack of signature		
drawings : 6		5. <input type="checkbox"/> priority document(s) identified in Box No. VI as item(s):		
sequence listing part of description : 4		6. <input type="checkbox"/> translation of international application into (language):		
Total number of sheets : 46		7. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material		
		8. <input checked="" type="checkbox"/> nucleotide and/or amino acid sequence listing in computer readable form		
		9. <input checked="" type="checkbox"/> other (specify): ITS Report SE99/00556		
Figure of the drawings which should accompany the abstract: 1		Language of filing of the international application: English		
Box No. IX SIGNATURE OF APPLICANT OR AGENT				
Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).				
Södertälje, 4 May 2000				
				
Sten Danielsson				
Global Intellectual Property, Patents, AstraZeneca AB				

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1. Date of actual receipt of the purported international application:	2. Drawings:
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4. Date of timely receipt of the required corrections under PCT Article 11(2):	<input type="checkbox"/> not received:
5. International Searching Authority (if two or more are competent): ISA /	6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid.

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Date 08/22/00
Atty. Docket 1103326-0633
Serial No. TBA

Sir:

NA PCT PCT/SE00/00878
Kindly acknowledge receipt of the accompanying:

- ☒ Specification and Claims 31 592 Rec'd PCT/PTC 22 AUG 2000
☒ Oath/Declaration and Power of Attorney ☒ Executed ☒ Not Executed
☒ 6 Sheets of 6 (filing fee) ☒ Informal drawings
☒ Check for \$ 1464
☐ Small entity declaration
☒ Assignment and Check for \$ 40 + Recordation
☐ Request 37 CFR ☐ 1.53c ☐ 1.53d ☐ 1.53b ☐ New Appl.
☐ Petition under 37 CFR 1.136 and Check \$ computer readable listing ☐ Continuation
☒ Other (specify) Diabetic containing ☐ Divisional
by placing your receiving date stamp hereon and mailing or returning to deliverer. ☐ CIP

Atty Menoua Due Date 1/1/01
* copy of PCT/RO/101 Request

22 AUG 2000
37 CFR 1.10
37 CFR 1.10
By Hand